



ROYAL COLLEGE OF  
PHYSICIANS OF IRELAND

# Wellbeing of Hospital Doctors in Ireland Research Study



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RCSI

**PaSQ Information and Discussion  
Meeting: Coping with the Adverse Event  
Impact on Patients, Professionals and  
Healthcare Institutions**

Madrid, November 23rd, 2015



# Study aim

To assess wellbeing in Irish doctors with a view to informing future interventions for prevention and access to preferred care

# Study objectives

1. To identify and rank **sources of work stress** of hospital doctors
2. To measure **psychological distress**
3. To measure **level of work stress**
4. To measure level of current **well being**
5. To measure lifestyle **health behaviours**
6. To identify **coping strategies**
7. To explore **experiences of coping and seeking help**
8. To elicit **preferred care pathways** and suggestions for **intervention** and improvement

# Why are the colleges doing this?

# Methodology

## 1. Delphi study

To identify & rank workplace stressors



## 2. Questionnaire

To measure, using a combination of standard instruments the prevalence of depression, anxiety and burnout. To identify the most significant stressors and the level of work stress. To measure lifestyle factors relevant to wellbeing. To measure subjective well being (see further slide)



## 3. Interviews

To capture qualitative data on doctors' experiences of coping, seeking help and their views on preferred pathways of care and suggestions for future interventions



# Workplace stressors

## Research question

- What are the key workplace stressors for hospital doctors in Ireland

## Study objectives

- To identify sources of work stress
- and to rank them

# Consultants

## PLANNING & DECISION MAKING

- Lack of long-term planning resulting in reactive service
- Decisions are often 'quick fix'
- Lack of good management leadership

## WORKFORCE/ QOC

- Shortage of doctors impacts on the ability to deliver safe care
- Inadequate facilities and infrastructure
- Inadequate time to accomplish important paper work
- # of patients

## CULTURE/ UNDERVALUED

- The contribution of doctors is perceived as having been devalued
- Threat of complaints is a backdrop to daily practice
- Increased and sometimes unrealistic expectations of patients

# Trainees

## WORKFORCE/ QOC

- Impact of shortage of doctors on the ability to deliver safe care
- Shortage of nurses and AHPs
- Inadequate resources to compensate for EWTD

## PERSONAL LIFE

- Relationship commitments / planning a family are surrendered to career demand
- Having to move workplace frequently is disruptive to personal life

## UNDERVALUED

- Revision to contract has devalued role
- Financial stress
- Consultant package no longer attractive
- The contribution of doctors is perceived as having been devalued
- Increased and sometimes unrealistic expectations of patients



# What about 2<sup>nd</sup> and 3<sup>rd</sup> victims?

Mistakes arising from human error are not acceptable (Trainees only)

The threat of complaints (and / or litigation) is a backdrop to daily practice exacerbated by the Medical Council's hostility to the profession

The consultant's role as leader is ill-defined. While seen as ultimately responsible for patients, consultants have an undefined vicarious liability for the actions of other team members, even those to whom treatment responsibility has been delegated.

There is a need to be overly concerned with documentary detail and unnecessary investigations / referrals in order to provide the evidence that appropriate care has been provided should things go wrong

At times I feel I need to apologise or make excuses for things which are not of my making

The contribution of doctors is perceived as having been devalued by commentary from both the HSE and the media and in recent years has contributed to a negative working environment and lack of trust.

# National Survey

## Captures and explores:

- Prevalence of anxiety, stress and depression
- Level of work stress experience
- Burnout
- Coping
- Wellbeing (WHO 5)
- Work ability
- Work-life balance
- Specific workplace stressors
- Lifestyle
- Stigma around mental health

## Sample

- Randomised sample
- Completed 1865 (Response rate 57%)

## Currently analysed

- Early results suggest:
  - M=F
  - Consultants = trainees
  - 85% Irish nationality

# Emerging areas for future focus

## Big Picture

Link between staff  
wellbeing and patient  
care

## Specific Challenges

Management/Doctor interface

Resources/cover

Feeling undervalued

Family friendly work conditions

Transition phases

Non-national doctors

Presenteeism

Bullying and antisocial behaviour

2<sup>nd</sup> victim, 3<sup>rd</sup> victim

Engagement

Conflict between consultant  
colleagues

## Interventions

to tackle specific  
challenges

to improve  
wellbeing

to improve  
coping

to improve help-  
seeking



Thank you

